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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby certify that this paper and the documents and/or fees referred to as attached therein are being deposited with the United States Postal Service on March 25., 2002 in an envelope as First Class Mail, addressed to: Assistant Commissioner for Patents, Washington, DC 20231.

Attorney Docket No.: CISCP041C1
First Named Inventor: HOWES, et al

Application No. 09/954,507

RESPONSE TO NOTICE TO FILE MISSING PARTS

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

Duplicate for fee processing

Sir: This is a Response to Notice to File Missing Parts in a patent application in the name of inventors:

RICHARD A. HOWES KEDWARD C. KERSEY BRUCE F. WONG JAMES A. JORDAN WILLIAM M. LEBLANC ANDREW L. FOSS

For: METHOD AND APPARATUS FOR MAINTAINING CONNECTION STATE BETWEEN A CONNECTION MANAGER AND A FAILOVER DEVICE

	04/04/2002 SSESHE1 00000019 0995450/		
Application Elements:	01 FC:117	920.00 OP	
Declaration Newly execute	d (original or copy)		
The entire disclosure herein supplied is co application and is he	rior application (37 CFR 1.63(d) for e of the prior application from which ensidered as being part of the disclopereby incorporated by reference therein of inventors Signed statement at	h a copy of the declaration is sure of the accompanying rein.	
	pplication, see 37 CFR 1.63(d)(2) a		
Accompanying Application Parts:			
Information Disclosure Stater Preliminary Amendment (New	nent with Form PTO-1449 w claims numbered after highest or	Copies of IDS Citations iginal claim in prior application.)	

Atty. Docket No. CISCP041C1

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Verified Statement Claiming Small Endesired. Other: Replacement copy of the speci					
<u>Amendments</u>					
Cancel in this application original claims before calculating the filing fee. (At least or	of the prior and original independen	pplicati nt claim	on must be retained.)		
Fee Calculation (37 CFR § 1.16)			,		
(Col. 1) (Col. 2)	SMALL ENTITY	OR	LARGE ENTITY		
NO. FILED NO. EXTRA RATE	•		RATE FEE		
BASIC FEE	\$355 \$	OR	\$710 \$		
TOTAL CLAIMS20 =	x9 = \$	OR	x18 = \$		
	x40 = \$	OR	x80 = \$		
		OR	\$260 = \$		
[] Multiple Dependent Claim Presented	\$130 = \$		Total \$		
* If the difference in Col. 1 is less than zero, enter "0" in Col. 2.	Total \$	OR	i otai 🤰		
Applicants petition for a three (3) month exter	nsion of time to respon	nd unde	r 37 CFR § 1.136(a).		
Check No. 470 in the amount of \$920.00 is enclosed.					
General Authorizations					
A licente hander make and concrelly outhor	za any Patitions for F	vtensio	as of Time as may be needed		
Applicants hereby make and generally authorize any Petitions for Extensions of Time as may be needed					
for this or any subsequent filings. The Commissioner is also authorized to charge any extension fees under 37 CFR §1.17 as may be needed to Deposit Account No. 50-0685 (Order No. CISCP041C1).					
The Commissioner is given general authorization to charge any fees or to credit any overpayment during the pendency of this application to Deposit Account No. 50-0685 (Order No. CISCP041C1).					
Please send correspondence to the following a	address:				
Customer No. 21912					
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4906 El Camino Real, Suite 205					
Los Altos, CA 94022					
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Date: $3/25/02$	m	\leq	•		
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	No. 39,882				
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